## UTILITY OR DESIGN PATENT APPLICATION AND FEE TRANSMITTAL

Attorney Docket No.: 741014.1021					
First Named Inventor:Carlos Alberto GODOY					
Title: DIFFERENTIATED RIGIDITY SWIMMING FLIPPER WITH HYDRODINAM HYDRODINAMICALLY DESIGNED REWARD SHOE STRAP CONNECTION					
APPLICATION ELEMENTS:					
<ol> <li>[X] Applicant claims small entity status</li> <li>[X] Specification, Claims and Abstract [Total Pages: 11]</li> <li>[X] Formal Drawing(s) [Total Sheets: 6]</li> <li>[X] Declaration and Power of Attorney [Total Pages: 3]         <ul> <li>a. [X] Newly executed (original or copy)</li> <li>b. [] Copy from a prior application</li></ul></li></ol>					
ACCOMPANYING APPLICATION PARTS:					
<ul> <li>6. [X] Assignment Papers (cover sheet &amp; document(s)) Assignee: Cressi-Sub S.p.A <ul> <li>a. [X] Newly executed (original or copy)</li> <li>b. [] Copy from a prior application</li> </ul> </li> <li>7. [] Information Disclosure Statement (IDS) [] Copies of IDS Citation(s)</li> <li>8. [X] Preliminary Amendment</li> <li>9. [X] Return Receipt Postcard</li> <li>10. [X] Certified Copy of Priority Document(s) [] English Translation Document(s)</li> <li>11. [X] Other: Letter Re Priority And Submission Of Priority Document</li> </ul>	·				
IF A CONTINUING APPLICATION:					
[] Continuation [] Divisional [] Continuation-in-part (CIP) of prior Application No.: Prior application information: Examiner: Group Art Unit:					
METHOD OF PAYMENT:					
<ol> <li>[X] The Commissioner is hereby authorized to charge indicated fees and credit any overpaymen Deposit Account Number: <u>50-0518</u> Deposit Account Name: <u>Steinberg &amp; Raskin, P.C.</u></li> </ol>	nts to:				
[X] Charge any additional fee required under 37 CFR 1.16 and 1.17					
2. [X] Payment Enclosed					
[] Check [X] Credit Card [] Money Order [] Other					
FEE CALCULATION:					
1. Basic Filing Fee					
Fee Description	Fee Paid				
Basic Filing Fee - Utility	\$375.00				

Subtotal (1): \$375.00

2. Extra Claim Fees:							
2. Extra Claim Fees:			Extra Claims		Fee		Fee Paid
Total Claims	9	- 20 =	0	x	\$9.00	=	\$0.00
Independent Claims	1	- 3 =	0	х	\$40.00	=	\$0.00
Multiple Dependent			-			=	N/A
					Subtotal	(2):	\$375.00
3. Additional Fees:							
Fee Description						Fee Paid	
		<del></del>	<del></del>				
Subtotal (3):							\$
				Total	Amount of Paym	ent:	\$375.00
CORRESPONDENCE A	DDRESS:						
Grant E. Pollack, Esq. Steinberg & Raskin, P.C. 1140 Avenue of the Amer New York, NY 10036-58							
PRACTITIONER(S) OF	RECORD:						
[X] Customer Number 21	<u>831</u>						
SUBMITTED BY:							
Name: Grant E. Pollack, Esq. Registration Number: 34,0				97			
Signature: Date: September 12, 2003							
CERTIFICATE OF MAILING							

Express Mail Label No.: EV 333147126 US

Date of Deposit: September 12, 2003

I hereby certify that this correspondence and/or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Signature

Grant E. Pollack

Name of person signing Certificate